



DISTRICT OF COLUMBIA
OFFICE OF ADMINISTRATIVE HEARINGS
441 4TH STREET, NW, SUITE 450 NORTH
WASHINGTON, DC 20001-2714



Tel: (202) 442-9094 • Fax: (202) 442-4789 • Email: oah.filing@dc.gov

<hr/> <div style="text-align: center;">Petitioner(s),</div> <div style="text-align: center;">v.</div> <hr/> <div style="text-align: center;">Respondent(s)</div>	<div style="text-align: right;">Case No(s).: _____</div>
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Request for a Different Hearing Date

You may ask for a different hearing date or time if you have an emergency or another good reason. You must try to get the other party to agree. After you have tried to reach the other party, complete this form and send it to the other party and to OAH. OAH will contact you to let you know if the date has been changed. If you do not hear from OAH, the date has not been changed.

Party Name: _____ Representative (if party has one): _____

Address: _____ Address: _____

_____ Ward: _____

Telephone: _____ Telephone: _____

Email: _____ Email: _____

☐ I consent to receive documents by email (OAH Rule 2841.16) ☐ I consent to receive documents by email (OAH Rule 2841.16)

1. Scheduled Hearing Date: _____ at _____ (AM/PM)

2. Requested Hearing Date: _____ at _____ (AM/PM) or _____ at _____ (AM/PM)

3. Reason for Request: _____

4. Did the other party agree to the requested new hearing date?

- ☐ **They agreed**
- ☐ **They did not agree**
- ☐ **I have not heard from them**

5. I sent a copy of this document to _____ (other party), on _____ (date): (Check one box)

- ☐ By **Fax** to: _____
- ☐ By **Mail** to the address: _____
- ☐ By **Hand-delivery** to address: _____
- ☐ By **Email** to (allowed only if the party has agreed in writing): _____

Name of person preparing request or providing information: _____

Signature: _____ Date: _____